

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER PICO California Action Fund Supporting Schools and Communities First-Yes on 15, No on 20			Date of This Filing <u>02/03/2023</u>	Date Stamp Page 1 of 3	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916)606-3865	I.D. NUMBER (if applicable) 1405294	Report No. <u>40607</u>			
STREET ADDRESS					
CITY Los Angeles	STATE CA	ZIP CODE 90033			
<input type="checkbox"/> Amendment to Report No. _____ (explain below)			No. of Pages <u>3</u>		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/02/2023	PICO California Action Fund Supporting Schools and Communities First-Yes on 15, No on 20 (nonprofit 501(c)(4)) Los Angeles, CA 90033 ID# 1428950 Memo Reference: F497P1.PAY228	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$150,000.00
02/02/2023	PICO California Action Fund Supporting Schools and Communities First-Yes on 15, No on 20 (nonprofit 501(c)(4)) Los Angeles, CA 90033 ID# 1428950 Memo Reference: F497P1.PAY229	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Los Angeles	STATE CA	ZIP CODE 90033	No. of Pages <u>3</u>		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

Memo Reference: F497P1.PAY228
Forgiveness of loan made 8/17/2020

Memo Reference: F497P1.PAY229
Forgiveness of loan made 11/3/2020
